

Linesville Boro- Crawford County

PO Box 145
Linesville, Pa. 16424
814-683-4382

Application for Zoning Hearing Board Appeal

Date Filed _____

Appeal No. _____

Name _____ of _____

(Home phone #) _____ (Work #) _____ (Cell #) _____

requests that a determination be made by the Zoning Hearing Board on the following appeal, which was denied by the Code Official on _____, for the reason that it was a matter which in the opinion of the Code Official should properly come before the Board based on Section _____, Subsection _____, Paragraph _____ of the Linesville Borough. Zoning Ordinance.

Reason for appeal: ___ interpretation of the Linesville Borough Zoning Ordinance or Zoning Map
___ special exception to the Zoning Ordinance on which the Zoning Hearing Board is required to rule on;
___ variance relating to ___ Area, ___ Height, ___ Use, ___ Yard (if Yard, check all that apply: ___ front, ___ side, ___ rear),
___ Other, explain: _____

REQUIRED INFORMATION:

Location of property subject to this appeal: _____

Assessment Number of Property: _____ Lot Size _____

Zoning District: _____

Has any appeal been filed in connection with this property prior to this? ___ Yes, ___ No

What is the applicant's interest in the property in this appeal? ___ Owner, ___ Contractor, ___ Agent ___ Lessee, ___ Legal Council for Owner

If granted, what is the approximate cost of the work involved? \$ _____

Present Use of Land _____ Proposed Use of Land _____

What improvement is being proposed for this property? _____

State the hardship that the present Zoning Ordinance imposes on you in respect to this appeal:

DATES TO REMEMBER

Cut-off Date: the 15th of the month prior to the scheduled hearing date

Hearing Date: _____

REQUIRED INFORMATION TO SUBMIT WITH APPLICATION:

Please submit the following to the Linesville Borough or Zoning Officer on or before the cut-off date for the respective meeting. Failure to file all documents will result in the appeal request being returned and a delay in the hearing date:

1. Four (4) copies of the survey of property showing the existing property lines and building and also the proposed improvements. The survey must also show dimensions perpendicular from existing and proposed buildings to the property lines: front yard, rear yard and both side yards.
2. Construction plans for the improvements.

FEE FOR APPLICATION:

The fee for this appeal is \$150.00 nonrefundable after the cut-off date listed above. All fees shall be paid by check, made payable to Linesville Borough. The fee shall be attached to the application upon filing. The fee is to cover the stenographer and ad for newspaper if the cost exceeds the \$150.00 you will be billed for the balance.

POSTING OF PROPERTY:

Upon filling of this appeal the applicant shall be given a legal notice for posting the subject property which must be posted visible from the street. Failure to have posted the subject property at least 14 days before the hearing date will result in the denial of this application.

SIGNATURE:

I hereby certify that all of the above statements and the statements contained in any and all papers or plans submitted for this requested appeal are true to the best of my knowledge and belief. I also agree to the conditions set forth by the Zoning Hearing Board as contained in this application form and understand that failure to provide the required information or documents could result in delay in the hearing, or denial, of the requested appeal.

Signature of applicant

FOR ZONING HEARING BOARD USE ONLY!

Decision: Appeal Granted _____ Date _____
 Appeal Denied _____ Date _____

Signed: _____

Secretary of the Zoning Hearing Board

Date: _____

Date of Hearing: _____ Fee Paid: _____